

7/10/01  
U.S. PTO

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PTO/SB/05 (11-00)  
Approved for use through 10/31/2002. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

7-11-01  
8160

Michael Lee Vatter

The Procter &amp; Gamble Company

Cosmetic Compositions

EF373620119US

PRO

U.S.

S.

2001

J109/902321

07/10/01

**APPLICATION ELEMENTS**

See MPEP Chapter 600 concerning utility patent application contents.

Commissioner for Patents  
Box Patent Application  
Washington, D.C. 20231

- |  |  |
|--|--|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br/><i>(Submit an original, and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status<br/><i>(see 37 CFR §1.27)</i></p> <p>3. <input checked="" type="checkbox"/> Specification      Total Pages [29]<br/><i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"> <li>- Descriptive Title of the Invention</li> <li>- Cross References to Related Applications</li> <li>- Statement Regarding Fed sponsored R&amp;D</li> <li>- Reference to sequence listing, a table, or a computer program listing appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings <i>(if filed)</i></li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul> <p>4. <input type="checkbox"/> Drawing(s) (35 USC §113)    Total Sheets []</p> <p>5. Oath or Declaration      Total pages [2]</p> <ul style="list-style-type: none"> <li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li> <li>b. <input type="checkbox"/> Copy from a prior application (37 CFR §1.63(d))<br/><i>(for continuation/divisional with Box 18 complete)</i></li> </ul> <p>i. <input type="checkbox"/> <b><u>DELETION OF INVENTORS</u></b><br/>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§1.63(d)(2) and 1.33(b).</p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR §1.76</p> | <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission<br/><i>(if applicable, all necessary)</i></p> <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Form (CRF)</li> <li>b. Specification Sequence Listing on:           <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li> <li>ii. <input type="checkbox"/> Paper</li> </ul> </li> <li>c. <input type="checkbox"/> Statement verifying identity of above copies</li> </ul> |
|--|--|

**ACCOMPANYING APPLICATION PARTS**

9.  Assignment Papers (cover sheet & document(s))
10.  37 CFR 3.73(b) Statement  Power of Attorney  
*(when there is an assignee)*
11.  English Translation Document *(if applicable)*
12.  Information Disclosure     Copies of IDS Statement (IDS)/PTO-1449 Citations
13.  Preliminary Amendment
14.  Return Receipt Postcard (MPEP 503)  
*(Should be specifically itemized)*
15.  Certified Copy of Priority Document(s)  
*(if foreign priority is claimed)*
16.  Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17.  Other: .....

18. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information below and in the preliminary amendment, or in an Application Data Sheet under 37 CFR §1.76:

Continuation     Divisional     Continuation-in-part (CIP)

of prior application No. /

Group/Art Unit: \_\_\_\_\_

Prior application information: Examiner: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here <b>27748</b> )
---	--

Name (Print/Type)	<b>Dara M. Kendall</b>	Registration No. (Attorney/Agent)	43,709
Signature			
	Date	July 10, 2001	

+ Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

**Complete if Known***Application Number**Confirmation Number**Filing Date*

July 10, 2001

*First Named Inventor*

Michael Lee Vatter

*Examiner Name**Group/Art Unit***TOTAL AMOUNT OF PAYMENT (\$)** 710.00*Attorney Docket No..*

8160

**METHOD OF PAYMENT (check one)**

- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 16-2480

Deposit Account Name The Procter &amp; Gamble Company

- Charge Any Additional Fee Required Under status. See 37 CFR §127  
37 C.F.R. §§1.16 and 1.17

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Code	(\$)	Fee Description	Fee Paid
105	130	Surcharge-late filing fee or oath	<input type="checkbox"/>
127	50	Surcharge-late provisional filing fee or cover sheet	<input type="checkbox"/>
139	130	Non-English specification	<input type="checkbox"/>
147	2,520	For filing a request for <i>ex parte</i> reexamination	<input type="checkbox"/>
112	920*	Requesting publication of SIR prior to Examiner's action	<input type="checkbox"/>
113	1,840*	Requesting publication of SIR after Examiner's action	<input type="checkbox"/>
115	110	Extension for reply within 1 <sup>st</sup> month	<input type="checkbox"/>
116	390	Extension for reply within 2 <sup>nd</sup> month	<input type="checkbox"/>
117	890	Extension for reply within 3 <sup>rd</sup> month	<input type="checkbox"/>
118	1,390	Extension for reply within 4 <sup>th</sup> month	<input type="checkbox"/>
128	1,890	Extension for reply within 5 <sup>th</sup> month	<input type="checkbox"/>
119	310	Notice of Appeal	<input type="checkbox"/>
120	310	Filing a brief in support of an appeal	<input type="checkbox"/>
121	270	Request for oral hearing	<input type="checkbox"/>
138	1,510	Petition to institute a public use proceeding	<input type="checkbox"/>
140	110	Petition to revive - unavoidable	<input type="checkbox"/>
141	1,240	Petition to revive - unintentional	<input type="checkbox"/>
142	1,240	Utility issue fee (or reissue)	<input type="checkbox"/>
143	440	Design issue fee	<input type="checkbox"/>
144	600	Plant issue fee	<input type="checkbox"/>
122	130	Petitions to the Commissioner	<input type="checkbox"/>
123	50	Petitions related to provisional applications	<input type="checkbox"/>
126	240	Submission of IDS per property (times number of properties)	<input type="checkbox"/>
146	710	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="checkbox"/>
149	710	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="checkbox"/>
179	710	Request for Continued Examination (RCE)	<input type="checkbox"/>
169	710	Request for expedited examination of a design application	<input type="checkbox"/>
Other fee (specify) _____			<input type="checkbox"/>
Other fee (specify) _____			<input type="checkbox"/>

**SUBTOTAL (1) (\$)** 710.00**2. EXTRA CLAIM FEES – Large Entity**

Extra Claims	Below Fee	Fee Paid
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Total Claims [14] - 20\*\* = [0] x [0] = [0]

Independent Claims [2] - 3\*\* = [0] x [0] = [0]

Multiple Dependent [ ] = [ ]

\*\* or number previously paid, if greater; For Reissues, see below

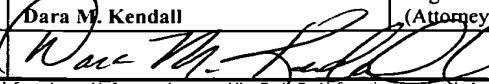
**Code (\$)** **Fee Description**

103	18	Claims in excess of 20
102	80	Independent claims in excess of 3
104	270	Multiple dependent claim, if not paid
109	80	**Reissue independent claims over original patent
110	18	**Reissue claims in excess of 20 & over original patent

**SUBTOTAL (2) (\$)** [-0-]

\* Reduced by Basic Filing Fee Paid

**SUBTOTAL(3) (\$)** [ ]**Complete (if applicable)**

Name (Print/Type)	Dara M. Kendall	Registration No. (Attorney/Agent)	43,709	Telephone	(513) 627-0081
Signature				Date	July 10, 2001

WARNING: Information on this form may become public. Credit Card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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